

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 8
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Stones' Phones			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012		
Mailing Address 1309 F Street NW Suite 300			Amount 5930.00		
City Washington State DC Zip Code 20004		Transaction ID : B443445			
Purpose of Expenditure GOTV calls		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District:		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 133586.93					
Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012		
Mailing Address 434 West 33rd Street			Amount 27.99		
City New York State NY Zip Code 10001		Transaction ID : B443446			
Purpose of Expenditure List rental		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District:		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶		
Calendar Year-To-Date Per Election for Office Sought 133586.93					
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			5957.99		
(b) SUBTOTAL of Unitemized Independent Expenditures▶					
(c) TOTAL Independent Expenditures.....▶					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Deirdre Schifeling</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 10 / 29 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Stones' Phones			Date MM / DD / YYYY 10 / 31 / 2012	
Mailing Address 1309 F Street NW Suite 300			Amount 6210.50	
City Washington	State DC	Zip Code 20004	Transaction ID : B443434	
Purpose of Expenditure GOTV calls		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 49540.57			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America			Date MM / DD / YYYY 10 / 31 / 2012	
Mailing Address 434 West 33rd Street			Amount 14.07	
City New York	State NY	Zip Code 10001	Transaction ID : B443436	
Purpose of Expenditure List rental		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Shelley Berkley			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 49540.57			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6224.57
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Deirdre Schifeling

[Electronically Filed]

Signature

Date

MM / DD / YYYY
10 / 29 / 2012

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(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼ C C00489799		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Stones' Phones			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012		
Mailing Address 1309 F Street NW Suite 300			Amount 6878.00		
City Washington State DC Zip Code 20004		Transaction ID : B443437			
Purpose of Expenditure GOTV calls		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought 82144.45			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012		
Mailing Address 434 West 33rd Street			Amount 56.72		
City New York State NY Zip Code 10001		Transaction ID : B443439			
Purpose of Expenditure List rental		Category/ Type 004		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought 82144.45			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) SUBTOTAL of Itemized Independent Expenditures.....			6934.72		
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures.....					
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Deirdre Schifeling</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 10 / 29 / 2012</p>					

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

Planned Parenthood Votes

FEC IDENTIFICATION NUMBER ▼

C C00489799

Check If ☒ 24-hour report ☐ 48-hour report☒ New report ☐ Amends report filed on

M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee

Stones' Phones

Date

M M / D D / Y Y Y Y Y Y
10 / 31 / 2012

Mailing Address 1309 F Street NW Suite 300

Amount

26221.50

City

Washington

State

DC

Zip Code

20004

Transaction ID : B443442

Purpose of Expenditure
GOTV callsCategory/
Type 004

Office Sought:

☐ House

State: VA

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tim Kaine

Calendar Year-To-Date Per Election
for Office Sought

148393.52

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Planned Parenthood Federation of America

Date

M M / D D / Y Y Y Y Y Y
10 / 31 / 2012

Mailing Address 434 West 33rd Street

Amount

70.00

City

New York

State

NY

Zip Code

10001

Transaction ID : B443443

Purpose of Expenditure
List rentalCategory/
Type 004

Office Sought:

☐ House

State: VA

☒ Senate

District:

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tim Kaine

Calendar Year-To-Date Per Election
for Office Sought

148393.52

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

26291.50

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

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Deirdre Schifeling

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 29 / 2012

Signature

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(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489799 </div>	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name (Last, First, Middle Initial) of Payee Stones' Phones		Date MM / DD / YYYY 10 / 31 / 2012	
Mailing Address 1309 F Street NW Suite 300		Amount 7079.00	
City Washington	State DE	Zip Code 20004	Transaction ID : B443432
Purpose of Expenditure GOTV calls	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 71941.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America		Date MM / DD / YYYY 10 / 31 / 2012	
Mailing Address 434 West 33rd Street		Amount 262.52	
City New York	State NY	Zip Code 10001	Transaction ID : B443433
Purpose of Expenditure List rental	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: MO <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 71941.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures.....		7341.52	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Deirdre Schifeling</i>		Date [Electronically Filed] MM / DD / YYYY 10 / 29 / 2012	

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(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			

Full Name (Last, First, Middle Initial) of Payee Stones' Phones			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012	
Mailing Address 1309 F Street NW Suite 300			Amount 6674.50	
City Washington	State DC	Zip Code 20004	Transaction ID : B443428	
Purpose of Expenditure GOTV calls		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Christopher Murphy			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 57896.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America			Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012	
Mailing Address 434 West 33rd Street			Amount 38.77	
City New York	State NY	Zip Code 10001	Transaction ID : B443429	
Purpose of Expenditure List rental		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Christopher Murphy			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 57896.11			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6713.27
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Deirdre Schifeling

[Electronically Filed]

Signature _____ Date M M / D D / Y Y Y Y Y Y
10 / 29 / 2012

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee Stones' Phones		Date 10 / 31 / 2012	
Mailing Address 1309 F Street NW Suite 300		Amount 100386.50	
City Washington	State DC	Zip Code 20004	Transaction ID : B443426
Purpose of Expenditure GOTV calls	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4028763.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America		Date 10 / 31 / 2012	
Mailing Address 434 West 33rd Street		Amount 887.59	
City New York	State NY	Zip Code 10001	Transaction ID : B443427
Purpose of Expenditure List rental	Category/ Type 004	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4028763.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		101274.09	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures.....			
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Deirdre Schifeling</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date 10 / 29 / 2012</p>			

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼ C C00489799	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) of Payee Stones' Phones		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012	
Mailing Address 1309 F Street NW Suite 300		Amount 5999.50	
City Washington	State DC	Zip Code 20004	Transaction ID : B443430
Purpose of Expenditure GOTV calls	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>IA</u> <input type="checkbox"/> Senate District: <u>04</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Christie Vilsack		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22464.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Full Name (Last, First, Middle Initial) of Payee Planned Parenthood Federation of America		Date M M / D D / Y Y Y Y Y Y 10 / 31 / 2012	
Mailing Address 434 West 33rd Street		Amount 13.04	
City New York	State NY	Zip Code 10001	Transaction ID : B443431
Purpose of Expenditure List rental	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>IA</u> <input type="checkbox"/> Senate District: <u>04</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Christie Vilsack		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22464.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		6012.54	
(b) SUBTOTAL of Unitemized Independent Expenditures▶			
(c) TOTAL Independent Expenditures.....▶		166750.20	
<p>Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.</p> <p style="text-align: center;">Deirdre Schifeling</p> <p style="text-align: center;">[Electronically Filed]</p> <p>Signature _____ Date M M / D D / Y Y Y Y Y Y 10 / 29 / 2012</p>			